

mmB

INTOX EC/IR II **Quality Assurance Worksheet**

Instrument Serial Number **010497** Worksheet Start Date **12/29/2014**

Location **South Boston PD**

Address **640 Hamilton Blvd South Boston VA 24592**

DFS Technician **Michelle Billeter** License No. **26417**

☐ Laboratory

☒ On-Site

Site Specification: No detrimental environmental conditions exist. ☒

Instrument Barometer (mm HG) **755** Reference Barometer (mm HG) **754**

Reference Barometer(RB)Serial # **009111** RB Calibration Due **5/19/2015**

Measurement Assurance Check

Standard (sea level)	PA Target	minimum	maximum	Sample 1	0.304
0.300	0.298	0.289	0.306	Sample 2	0.303
Precision		sample min	sample max	Sample 3	0.302
0.002		0.302	0.304		

Standard (sea level)	PA Target	minimum	maximum	Sample 1	0.099
0.100	0.100	0.097	0.103	Sample 2	0.099
Precision		sample min	sample max	Sample 3	0.099
0		0.099	0.099		

Dry gas standard Lot No. (with tank no.)

AG316301-02

☐ Replaced dry gas standard (+O-ring)

☐ Installed at Location

☐ Removed to DFS-Central

Supplies
 Mouthpieces
 Certificates of Analysis
 Operator Worksheet
 Other:



Notes:

Replaced UPS Back-Up Battery.

Instrument Serial Number

010497

Certification Date

☐ Calibrated☐ Certified☒ Measurement Assurance Check☒ Instrument Test☐ Troubleshooting/Maintenance Worksheet Completed

(Successful completion denotes satisfactory condition of the item.)

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.250		0.000	0.000	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.150		0.000	0.000	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.080		-0.003	0.003	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.020		-0.003	0.003	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

All measurements are in g/210L

Estimation of Uncertainty of Measurement and traceability records are located within the Breath Alcohol Section

DFS Technician

Michelle Bullett

Date

12/29/14

Issuing Analyst

Michelle Bullett

Date

12/29/14JPD



COMMONWEALTH OF VIRGINIA
DEPARTMENT OF FORENSIC SCIENCE

CERTIFICATE OF BLOOD ALCOHOL ANALYSIS
AS DETERMINED BY A CHEMICAL TEST OF THE ACCUSED'S BREATH

NAME OF ACCUSED	NAME OF COURT
INSTRUMENT, TEST,	DFS

BREATH ANALYSIS

SAMPLE EXAMINED AND TEST CONDUCTED BY		AGENCY
BILLETER, MICHELLE, M		DFS Central Lab
DFS LICENSE NUMBER	LICENSE EXPIRES	DATE TEST CONDUCTED
26417	10/01/2016	12/29/2014
TEST EQUIPMENT NUMBER		
010497		

RESULTS: TIME SAMPLE TAKEN 11:26 EST

SAMPLE'S ALCOHOL CONTENT 0.00 GRAMS PER 210 LITERS OF BREATH

ATTEST:

I CERTIFY THAT THE ABOVE IS AN ACCURATE RECORD OF THE TEST CONDUCTED; THAT THE TEST WAS CONDUCTED WITH THE TYPE OF EQUIPMENT AND IN ACCORDANCE WITH THE METHODS APPROVED BY THE DEPARTMENT OF FORENSIC SCIENCE; THAT THE TEST WAS CONDUCTED IN ACCORDANCE WITH THE DEPARTMENT'S SPECIFICATIONS; THAT PRIOR TO ADMINISTRATION OF THE TEST THE ACCUSED WAS ADVISED OF HIS RIGHT TO OBSERVE THE PROCESS AND SEE THE BLOOD ALCOHOL READING ON THE EQUIPMENT USED TO PERFORM THE BREATH TEST, AND THAT I POSSESS A VALID LICENSE TO CONDUCT SUCH TEST, GIVEN UNDER MY HAND THIS _____ DAY OF _____, 20 _____.

BREATH TEST OPERATOR

☐ I HAVE RECEIVED A COPY OF THIS CERTIFICATE OF ANALYSIS _____
SUBJECT'S SIGNATURE

☐ SUBJECT REFUSED TO SIGN FOR COPY OF CERTIFICATE OF ANALYSIS _____
OPERATOR'S SIGNATURE



IntoxNet MIS Report

Report Generated 29 Dec 2014 at 12:11

mmB

Test Results

Instrument Serial Number 010497

Test # 000843 Subject Test

Test Location 1 Department of
Test Date 29 Dec 2014

Test Location 2 Forensic Science
Test Time 11:20
Remote/Local Local

Test Location 3
System Check Passed

Operator's Last Name BILLETER
Agency DFS Central Lab

Operator's First Name MICHELLE

Operator's Middle Initial M
License Number 26417

Card Serial Number 126417

Effective Date 10/01/2014

Expiration Date 10/01/2016

Subject's Last Name INSTRUMENT

Subject's First Name TEST

Subject's Middle Initial

Subject's Date of Birth 00/00/0000

Subject's Sex Male

Driver's License Number

Driver's License Expiration 00/00/0000

Driver's License State

Court Name DFS

End Date 29 Dec 2014 End Time 11:27

Result Time 11:26

Result Date 29 Dec 2014 Result 0.00

Data Type DIAG

Sample Value Pass

Sample Time 11:20

Data Type BLK

Sample Value 0.000

Sample Time 11:21

Data Type CHK

Sample Value 0.100

Sample Time 11:22

Data Type BLK

Sample Value 0.000

Sample Time 11:23

Data Type SUBJ

Sample Value 0.000

Sample Time 11:24

Data Type BLK

Sample Value 0.000

Sample Time 11:25

Data Type SUBJ

Sample Value 0.000

Sample Time 11:26

Data Type BLK

Sample Value 0.000

Sample Time 11:27

Standard Type Dry Gas Std

Standard Value 0.100

Standard Lot Number AG316301-02

Standard Expiration Date 06/12/2015

Tank Pressure 477

Barometric Pressure 756 mmHg

Blow Sample Number 1 Blow Duration 4.20 sec

Blow Volume 1827 cc End-of-Blow Time 11:24

Blow Sample Number 2 Blow Duration 4.10 sec

Blow Volume 1762 cc End-of-Blow Time 11:26

Tamper Evident Stamp 4c029cfe

Test Status Code 0

Test Status Success

mmb

Intox EC/IR-11: Accuracy Check

Department of Forensic Science

Serial Number: 010497 Test Number: 844

Test Date: 12/29/2014 Test Time: 11:41 EST

Dry Gas Target: 0.298

Lot Number: AG428003-03 Exp Date: 10/07/2016

Tank Pressure: 213 psi Barometric Pressure: 756 mmHg

System Check: *Passed*

Test	g/210L	Time
BLK	0.000	11:42
CHK	0.304	11:43
BLK	0.000	11:44
CHK	0.303	11:45
BLK	0.000	11:47
CHK	0.302	11:48

Test Status: *Success*

Calibration CRC: A3CCCC1A

Intox EC/IR-11: Accuracy Check

Department of Forensic Science

Serial Number: 010497 Test Number: 845

Test Date: 12/29/2014 Test Time: 11:51 EST

Dry Gas Target: 0.100

Lot Number: AG316301-02 Exp Date: 06/12/2015

Tank Pressure: 468 psi Barometric Pressure: 756 mmHg

System Check: *Passed*

Test	g/210L	Time
BLK	0.000	11:52
CHK	0.099	11:53
BLK	0.000	11:55
CHK	0.099	11:55
BLK	0.000	11:57
CHK	0.099	11:57

Test Status: *Success*

Calibration CRC: A3CCCC1A

mmB




COMMONWEALTH OF VIRGINIA
DEPARTMENT OF FORENSIC SCIENCE

CERTIFICATE OF BLOOD ALCOHOL ANALYSIS
AS DETERMINED BY A CHEMICAL TEST OF THE ACCUSED'S BREATH

NAME OF ACCUSED INSTRUMENT, TEST,	NAME OF COURT DFS
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BREATH ANALYSIS

SAMPLE EXAMINED AND TEST CONDUCTED BY BILLETER, MICHELLE, M		AGENCY DFS Central Lab
DFS LICENSE NUMBER 26417	LICENSE EXPIRES 10/01/2016	DATE TEST CONDUCTED 12/29/2014
TEST EQUIPMENT NUMBER 010497		

RESULTS: TIME SAMPLE TAKEN 12:06 EST
 SAMPLE'S ALCOHOL CONTENT 0.00 GRAMS PER 210 LITERS OF BREATH

ATTEST:

I CERTIFY THAT THE ABOVE IS AN ACCURATE RECORD OF THE TEST CONDUCTED; THAT THE TEST WAS CONDUCTED WITH THE TYPE OF EQUIPMENT AND IN ACCORDANCE WITH THE METHODS APPROVED BY THE DEPARTMENT OF FORENSIC SCIENCE; THAT THE TEST WAS CONDUCTED IN ACCORDANCE WITH THE DEPARTMENT'S SPECIFICATIONS; THAT PRIOR TO ADMINISTRATION OF THE TEST THE ACCUSED WAS ADVISED OF HIS RIGHT TO OBSERVE THE PROCESS AND SEE THE BLOOD ALCOHOL READING ON THE EQUIPMENT USED TO PERFORM THE BREATH TEST, AND THAT I POSSESS A VALID LICENSE TO CONDUCT SUCH TEST, GIVEN UNDER MY HAND THIS _____ DAY OF _____, 20_____.

BREATH TEST OPERATOR

☐ I HAVE RECEIVED A COPY OF THIS CERTIFICATE OF ANALYSIS _____ SUBJECT'S SIGNATURE

☐ SUBJECT REFUSED TO SIGN FOR COPY OF CERTIFICATE OF ANALYSIS _____ OPERATOR'S SIGNATURE



IntoxNet MIS Report

Report Generated 29 Dec 2014 at 12:11

mmB

Test Results

Instrument Serial Number 010497

Test # 000846 Subject Test

Test Location 1 Department of
Test Date 29 Dec 2014

Test Location 2 Forensic Science
Test Time 11:59
Remote/Local Local

Test Location 3
System Check Passed

Operator's Last Name BILLETER
Agency DFS Central Lab

Operator's First Name MICHELLE

Operator's Middle Initial IV

Card Serial Number 126417

License Number 26417

Effective Date 10/01/2014

Expiration Date 10/01/2016

Subject's Last Name INSTRUMENT

Subject's First Name TEST

Subject's Middle Initial

Subject's Date of Birth 00/00/0000

Subject's Sex Male

Driver's License Number

Driver's License Expiration 00/00/0000

Driver's License State

Court Name DFS

End Date 29 Dec 2014

End Time 12:07

Result Time 12:06

Result Date 29 Dec 2014

Result 0.00

Data Type DIAG

Sample Value Pass

Sample Time 12:00

Data Type BLK

Sample Value 0.000

Sample Time 12:01

Data Type CHK

Sample Value 0.098

Sample Time 12:01

Data Type BLK

Sample Value 0.000

Sample Time 12:03

Data Type SUBJ

Sample Value 0.000

Sample Time 12:03

Data Type BLK

Sample Value 0.000

Sample Time 12:04

Data Type SUBJ

Sample Value 0.000

Sample Time 12:06

Data Type BLK

Sample Value 0.000

Sample Time 12:07

Standard Type Dry Gas Std

Standard Value 0.100

Standard Lot Number AG316301-02

Standard Expiration Date 06/12/2015

Tank Pressure 458

Barometric Pressure 756 mmHg

Blow Sample Number 1

Blow Duration 3.64 sec

Blow Volume 1699 cc

End-of-Blow Time 12:03

Blow Sample Number 2

Blow Duration 4.42 sec

Blow Volume 1823 cc

End-of-Blow Time 12:06

Tamper Evident Stamp 9ce4a111

Test Status Code 0

Test Status Success

Department of Forensic Science
Breath Alcohol Section
Trouble Call Log
12/25/2014 To 12/31/2014

mmb

MSK

Instrument Serial Number: 010497

31-Dec-14

Date: 25-Dec-14 Time: 7:30 PM Remote: True Tech: MSK (21355) Location: South Boston PD

Indication: LOSS OF POWER

Problem: LOSS OF POWER TO UPS BACK UP BATTERY.

Technician Response: AGENCY CONTACTED VIA PHONE. OPERATOR INSTRUCTED TO BYPASS UPS BACK UP BATTERY AND PERFORM INSTRUMENT TEST.

Resolution RETURNED TO SERVICE.
